

Work Order ID 109618 647.9410  
November-21-13 2:44:04 PM B 109618

\*109618\*

Page 1

Item ID: 647.9410

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Lower Deflector

Start Date: 11/21/13 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 11/21/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-11-22 Tooling: Date: QC: Date: SPC (Y/N): Date:

Run Start \*NR1\*  
Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
647.9400	A

100 0.00

\*100\*

BAND SAW

Bandsaw

Memo

0.00

Jeaspa Bandsaw

Cut Blank at 9.375"

\*\*\* ONE BLANK MAKES TWO PARTS\*\*\*

110 0.00

\*110\*

HAAS CNC VERTICAL MACHINING #1

HAAS I

Memo

0.00

HAAS CNC vertical machine #1

1-Machine per folio FB196

DWG REV: A

FOLIO REV: AA

2- deburr and break all sharp edges

2 14-04-10

14/04/13

4 10

DAS  
14  
9-89

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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**Work Order ID 109618**

November-21-13 2:44:04 PM

**\*109618\***

Page 2

Item ID: 647.9410

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Lower Deflector

Start Date: 11/21/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 11/21/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC2- Inspect parts off machine FAI/FAIB	0.00							
<b>*120*</b>									
QC	Memo	0.00							
Quality Control									
130	QC8- Inspect parts - second check	0.00							
<b>*130*</b>									
QC	Memo	0.00							
Quality Control									

14/04/13

4

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DAS  
14  
9-89

14/04/14

4

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DAS  
44  
9-89

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Grain	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

# Work Order ID 109618

November-21-13 2:44:04 PM

**\*109618\***

Page 3

Item ID: 647.9410 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Lower Deflector  
 Start Date: 11/21/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 11/21/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
<b>*140*</b>									
Outsource4	Memo	0.00							
Outsource process - Anodize	Issue P/O to ATG : <u>23813</u>								
	1- Black Anodize as per Dwg 647.9400								
	2- PRIME AS PER DWG, SEE NOTE #7 (***DISREGARD AFTER ASSEMBLY***)								
	Certification of Comformity is required								
150	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*150*</b>									
Packaging	Memo	0.00							
Packaging									

CL 14/04/15 4

14/04/15 64

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 109618

\*109618\*

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November-21-13 2:44:04 PM

Item ID: 647.9410 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Lower Deflector  
 Start Date: 11/21/13 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 11/21/13 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
155 *155* QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00 0.00				4			
180 *180* Packaging Packaging	Identify as per dwg & Stock Location <del>8</del> CA  Memo ***IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV***	0.00 0.00				4x		14-4-28	DAS 28 9-89
190 *190* QC Quality Control	QC21- Final Inspection - Work Order Release  Memo	0.00 0.00						14/4/29	

14.04.28

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other _____ _____ _____ _____
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# Picklist Print

November-21-13 2:44:03 PM

Page 1

Work Order ID: 109618

Parent Item: 647.9410

Start Date: 11/21/13

Required Date: 11/21/13

Parent Item Name: Lower Deflector

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A NEW ISSUE. JFS 13/06/04 VERIFY BY: JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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M7075T6B0.375X3.000  
7075-T6 BAR 0.375" X 3.000"

Purchased

No

100

f

19.7400

0.391

1

DL 14-04-10

Location

Loc Qty

Loc Code

MAT049

19.74

123611

16

m126390

3.74

1.5625

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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<b>APICAL</b> INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 03762				SHEET 1 OF 1	
	DWG NO. 647.9400	REV: A	PREPARED BY B. PETERS	DATE: 01/07/13	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	DWG TITLE: DEFLECTORS					
	APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER		
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	REASON: REVISED HOLE DIAMETER TO REFLECT PIN DIAMETER IN NEXT ASSY.					

TAG	X LOC	Y LOC	SIZE
A1	-8.949	-4.066	Ø .201
A2	-6.172	-3.562	Ø .201
B1	-7.903	-5.121	Ø .253
C1	-5.978	-.267	Ø .165
C2	-3.863	-.267	Ø .165
C3	-1.758	-.267	Ø .165
D1	-5.159	-2.500	Ø .250

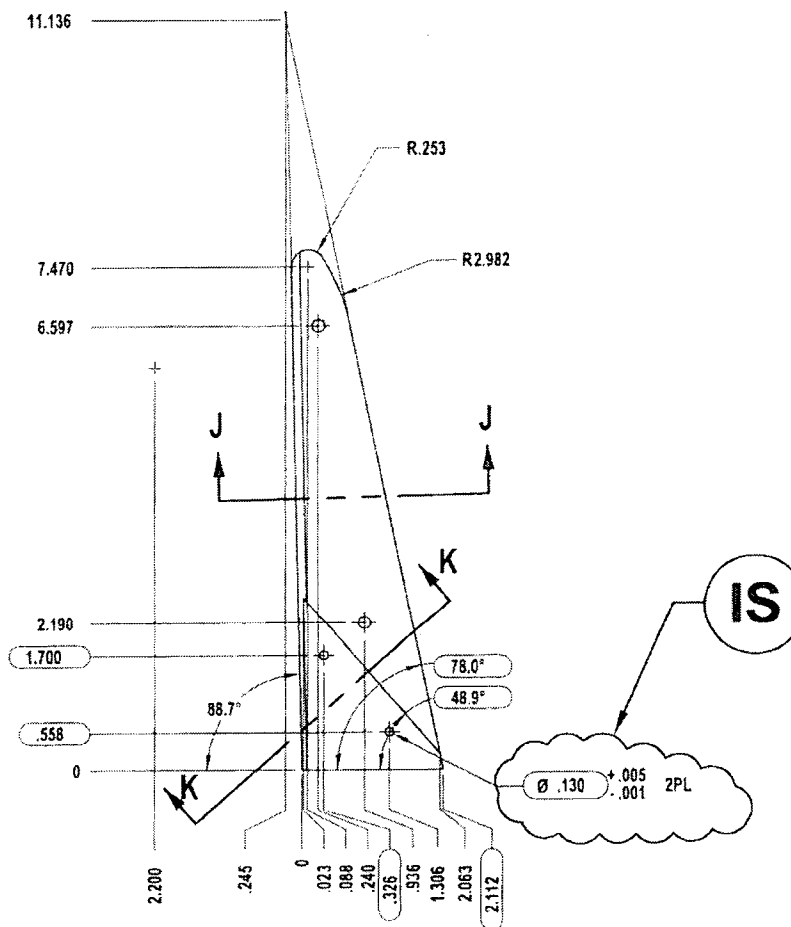
IS

109618 MLS  
13-11-22

**SHEET 9, ZONE C8 IS:**

DOCUMENTS EFFECTED:	<input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> ICA <input type="checkbox"/> BOM	CHANGE CATEGORY	DER REVIEW REQUIRED
		<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

<b>APICAL</b> INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 03739				SHEET 1 OF 1	
	DWG NO. 647.9400	REV: A	PREPARED BY B. PETERS	DATE: 12/07/12	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	DWG TITLE: DEFLECTORS					
	APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER		
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	REASON: REVISED TOLERANCE ON HOLE DIAMETER TO REFLECT RIVET DIAMETER.					



**SHEET 8, ZONE D4 IS:**

DOCUMENTS EFFECTED:	<input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> ICA <input type="checkbox"/> BOM	CHANGE CATEGORY	DER REVIEW REQUIRED
		<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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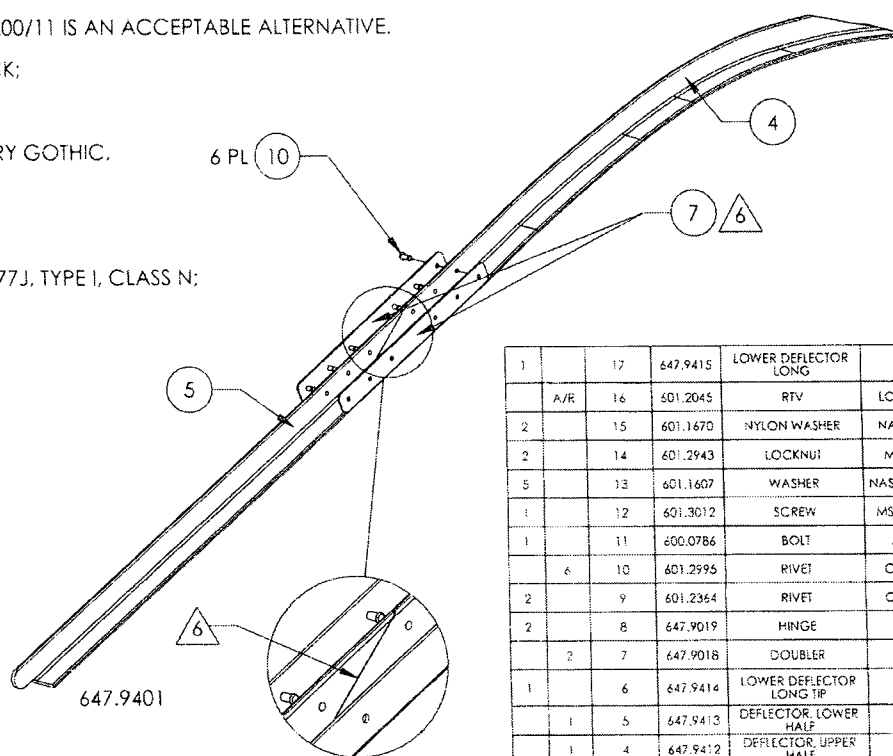
REV	DESCRIPTION	DATE	APPROVED
1	INITIAL PROTOTYPE RELEASE (P/P)		
2	INITIAL RELEASE	10-09-93	P. BRAY
3	INCORPORATE ECH-00077, 00056, 00078 AND 00084	10-23-92	J. GARTNER

# NOTES: UNLESS OTHERWISE SPECIFIED

- 1 MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12. AMS-QQ-A-200/11 IS AN ACCEPTABLE ALTERNATIVE.
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK;
3. DE BURR AND BREAK ALL SHARP EDGES.
4. IDENTIFY IAW MPP-120. LASER ETCH P/N AND REVISION, 12 PT. CENTURY GOTHIC.
5. ALL DIMENSIONS SHOWN PRIOR TO FINISH.
- 6 APPLY F/N 17 TO FAYING SURFACES.
- 7 FINISH: PRETREAT PR-148 ADHESION PROMOTER, PRIME IAW MIL-P-23377J, TYPE I, CLASS N; 1-2 MIL MAX. APPLY FINISH AFTER ASSEMBLY.
- 8 TORQUE 15-20 IN.-LBS.
- 9 DIMENSION SHOWN IS FOR INSPECTION AFTER FINISHING.

UNINCORPORATED ECN(S)

03739



1		17	647.9415	LOWER DEFLECTOR LONG		
	A/R	16	501.2045	RTV	LOCTITE 598	
2		15	601.1670	NYLON WASHER	NAS1515H3L	
2		14	601.2943	LOCKWASHER	MS21042-3	
5		13	601.1607	WASHER	NAS1149F0332P	
1		12	601.3012	SCREW	MS27039-1-15	
1		11	600.0786	BOLT	AN3C7A	
	6	10	601.2995	RIVET	CR3213-6-6	
2		9	601.2364	RIVET	CR3213-4-8	
2		8	647.9019	HINGE		
	2	7	647.9018	DOUBLER		
1		6	647.9414	LOWER DEFLECTOR LONG TIP	1	2 1
	1	5	647.9413	DEFLECTOR LOWER HALF	1	2
	1	4	647.9412	DEFLECTOR UPPER HALF	1	2
1		3	647.9501	QUICK RELEASE PIN ASSY		
		2	647.9411	UPPER DEFLECTOR	1	2 1
		1	647.9410	LOWER DEFLECTOR	1	2 1
			647.9402	LOWER DEFLECTOR LONG ASSY		
			647.9401	DEFLECTOR ASSY		1

QTY	FINISH #	PART #	DESCRIPTION	MATL	SPEC.
1	9401		DEFLECTOR ASSY		
1	9402		DEFLECTOR ASSY		
1	9403		DEFLECTOR ASSY		
1	9404		DEFLECTOR ASSY		
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1	9420		DEFLECTOR ASSY		

QTY	FINISH #	PART #	DESCRIPTION	MATL	SPEC.
1	9401		DEFLECTOR ASSY		
1	9402		DEFLECTOR ASSY		
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1	9420		DEFLECTOR ASSY		

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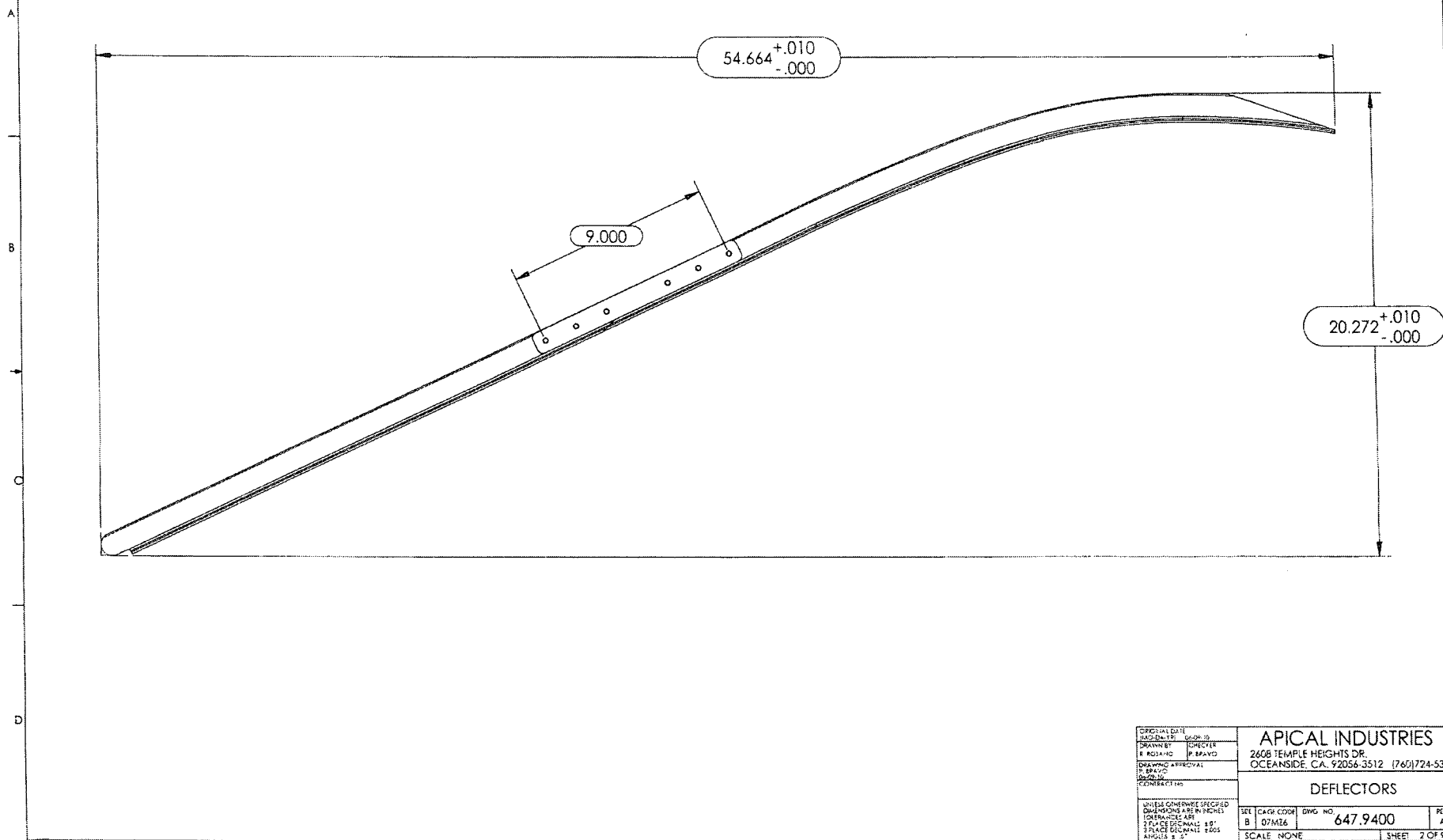
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1	9420		DEFLECTOR ASSY		

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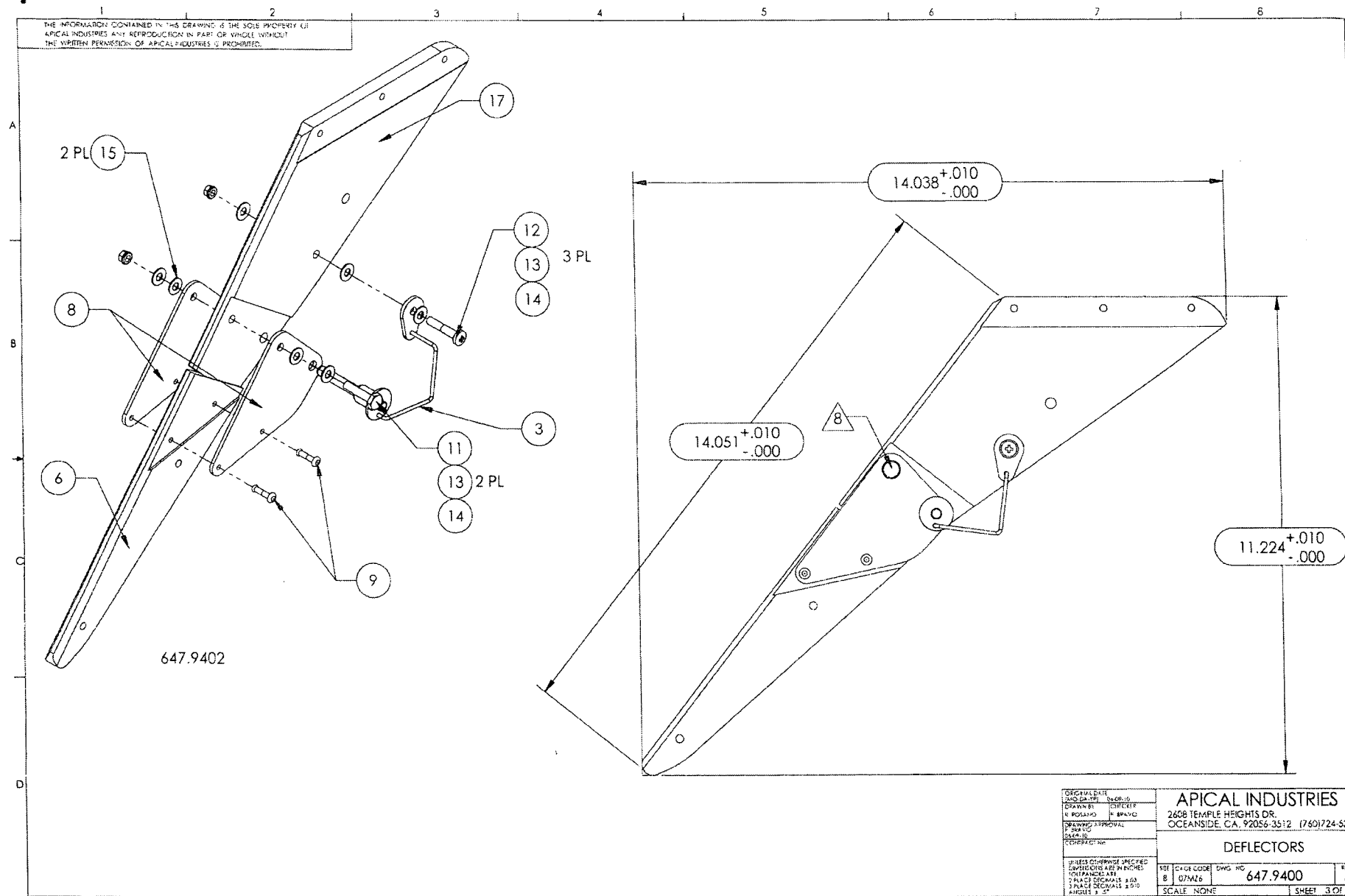
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1	9420		DEFLECTOR ASSY		

QTY		PARTS LIST	
NEXT ASSY IS		APICAL INDUSTRIES	
647.8900		2638 TEMPE F HEIGHTS DR.	
647.9200		OCEANSIDE CA 92056-3512 (760)724-5300	
CONTRACTING		DEFLECTORS	
UNLESS OTHERWISE SPECIFIED		SEE CAD CODE DOWS INCH	
DEFLECTOR ASSY 647.8900		B 07M26	
DEFLECTOR ASSY 647.9200		647.9400	
DEFLECTOR ASSY 647.9200		SCALE NONE	
DEFLECTOR ASSY 647.9200		SHEET 1 OF 9	

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APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT  
THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.



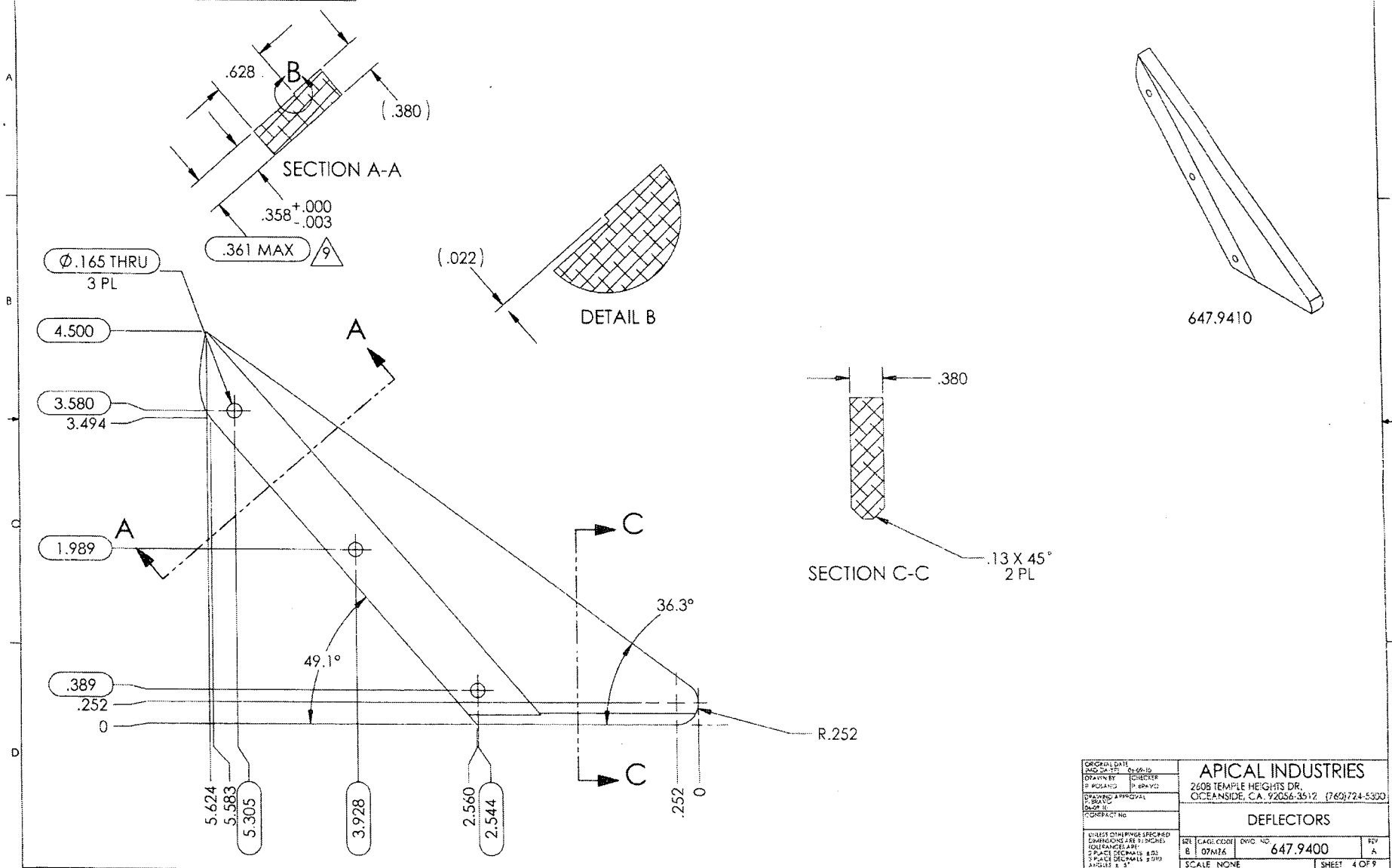
THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.



ORIGINAL DATE AND DRAWING NUMBER		APICAL INDUSTRIES	
DRAWN BY N. ROSARIO		2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
CHECKED BY J. BRAYCO		DEFLECTORS	
DRAWING APPROVAL DATE		REV. A	
CONTRACT NO.		647.9400	
IF BUILT CHANGES SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE 7 PLACE DECIMALS ± .01 3 PLACE DECIMALS ± .005 ANGLES ± 5°		SCALE: NONE	SHEET 3 OF 9



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ORIGINAL DATE: 02-06-10		APICAL INDUSTRIES	
DRAWN BY: J. HENDER	DESIGNED BY: J. HENDER	2608 TEMPLE HEIGHTS DR.,	
DRAWING APPROVAL: J. HENDER	DATE: 02-06-10	OCEANSIDE, CA 92056-3512 (760) 724-5300	
PROJECT NO:		DEFLECTORS	
1: BEST OTHER PING SPECIFIED	2: DIMENSIONS ARE IN INCHES	REV: 8	REV: A
3: TOLERANCES ARE:	4: PLACE DECIMALS 4 DS	647.9400	
5: PLACE DECIMALS 2 DS	6: ANGLES 1/2°	SCALE: NONE	
		SHEET 4 OF 9	

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SECTION D-D

SECTION E

SECTION F-F

DETAIL E

DEFLECTORS

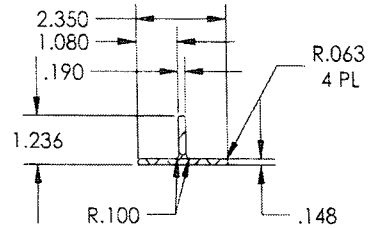
647.9411

647.9400

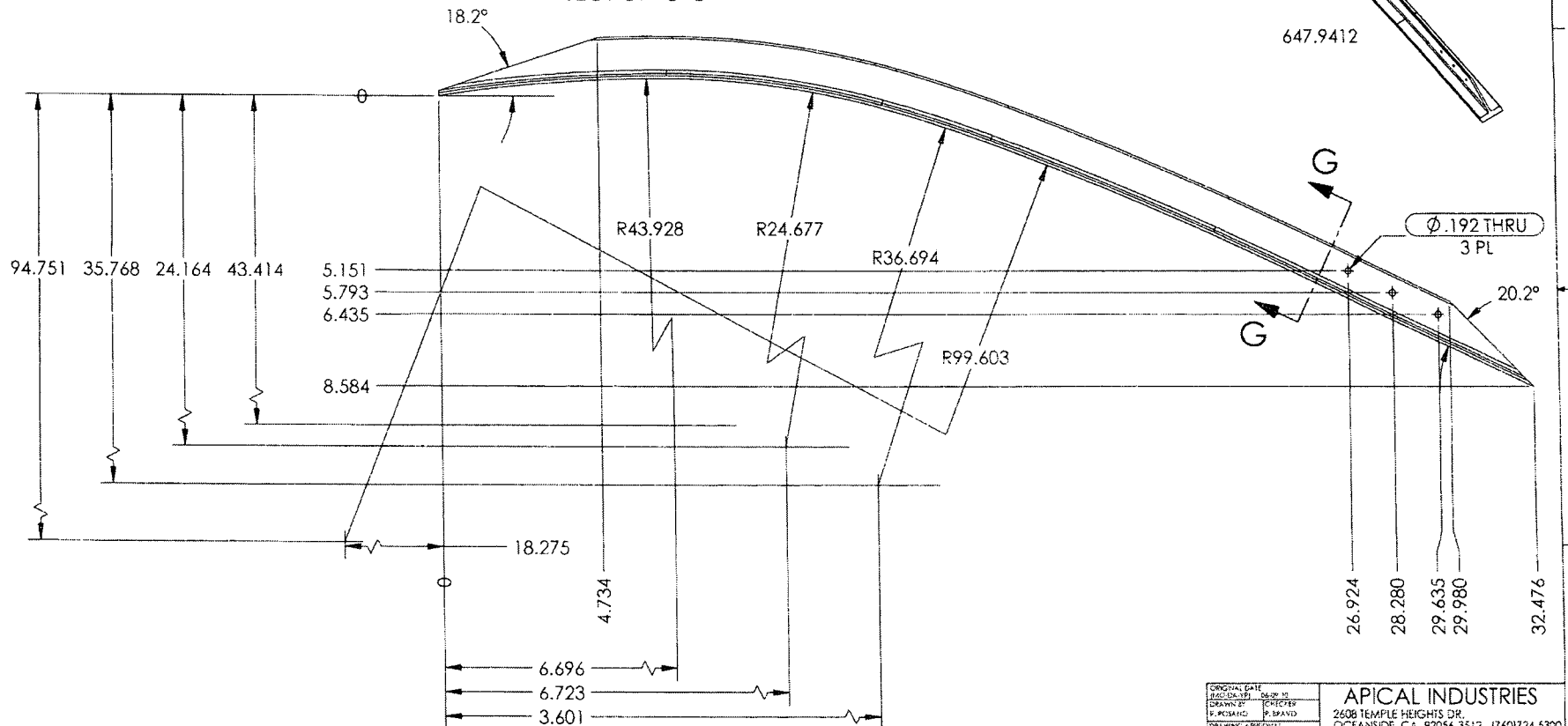
5 OF 5

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THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES. ANY REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

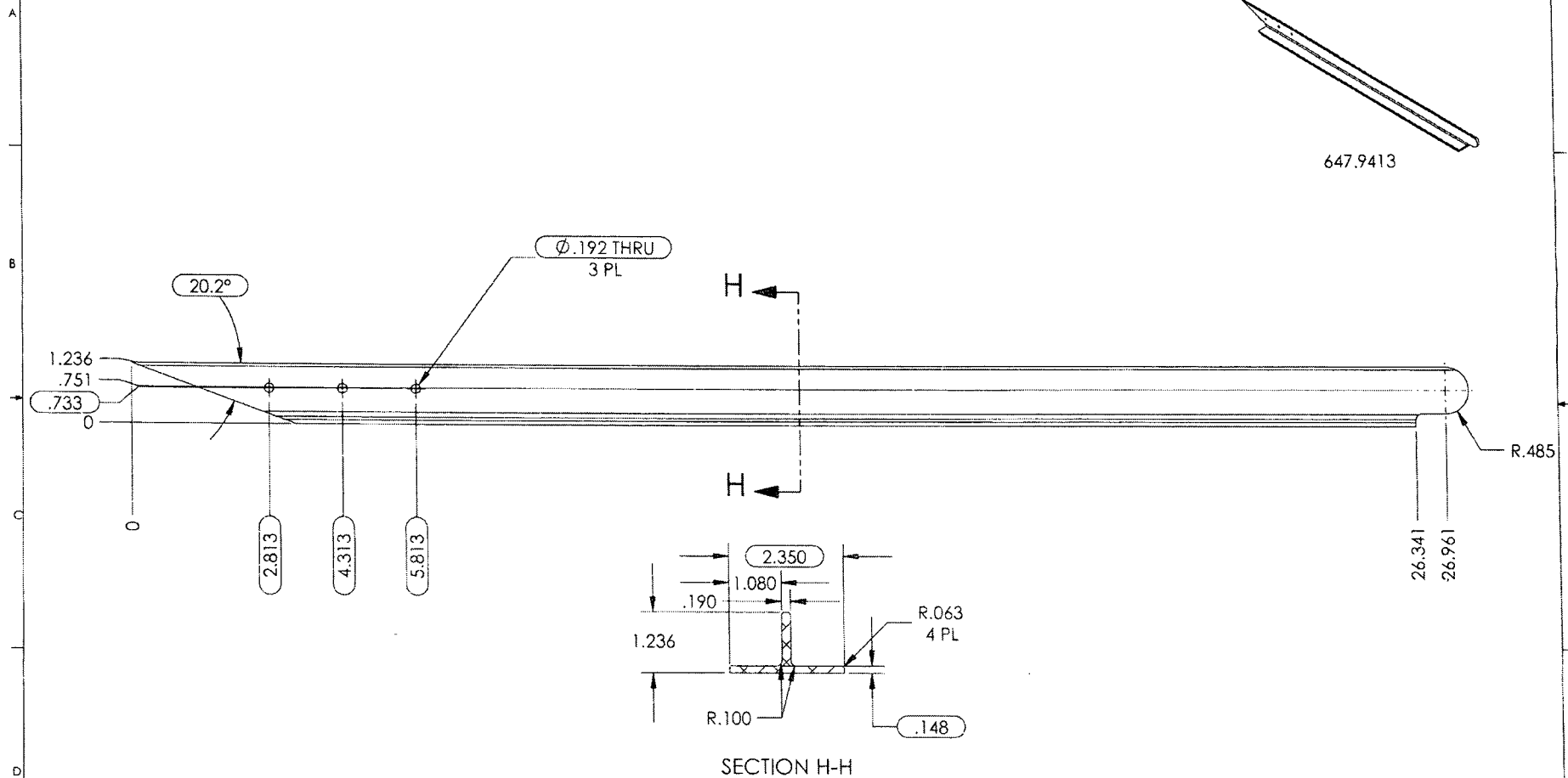


SECTION G-G



ORIGINAL DATE		APICAL INDUSTRIES	
DRAWN BY: J. MCMAHON		2608 TEMPLE HEIGHTS DR.	
CHECKED BY: P. BRAND		OCEANSIDE, CA. 92056-3512 (760) 724-5300	
DRAWING APPROVAL: P. BRAND		DEFLECTORS	
CONTRACT NO.		647.9400	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS FEET 1 PLACE DECIMALS ±.05 ANGLES ±.5°		SEE TANK CODE: B 07M26	SCALE: NONE
		DATE: 11/12/00	SHEET: 6 OF 9

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ORIGINAL DATE	2/2/88	DESIGNED BY	APICAL INDUSTRIES
DRAWN BY	APICAL INDUSTRIES	CHECKED BY	APICAL INDUSTRIES
IN CHARGE	APICAL INDUSTRIES	DATE	2/2/88
PROJECT NO.	647.9400	SCALE	NONE
REV	A	SHEET	2 OF 9

THE INFORMATION CONTAINED BY THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

11.136

7.470

6.597

2.190

1.700

.558

0

2.200

.245

0

.023

.088

.240

.326

.936

1.306

2.063

2.112

R.253

R2.982

88.7°

78.0°

48.9°

Ø.130 2PL

.13 x 45°  
2 PL

.380

SECTION J-J

.280

.050  
2 PL

SECTION K-K

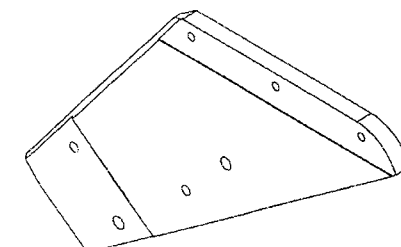
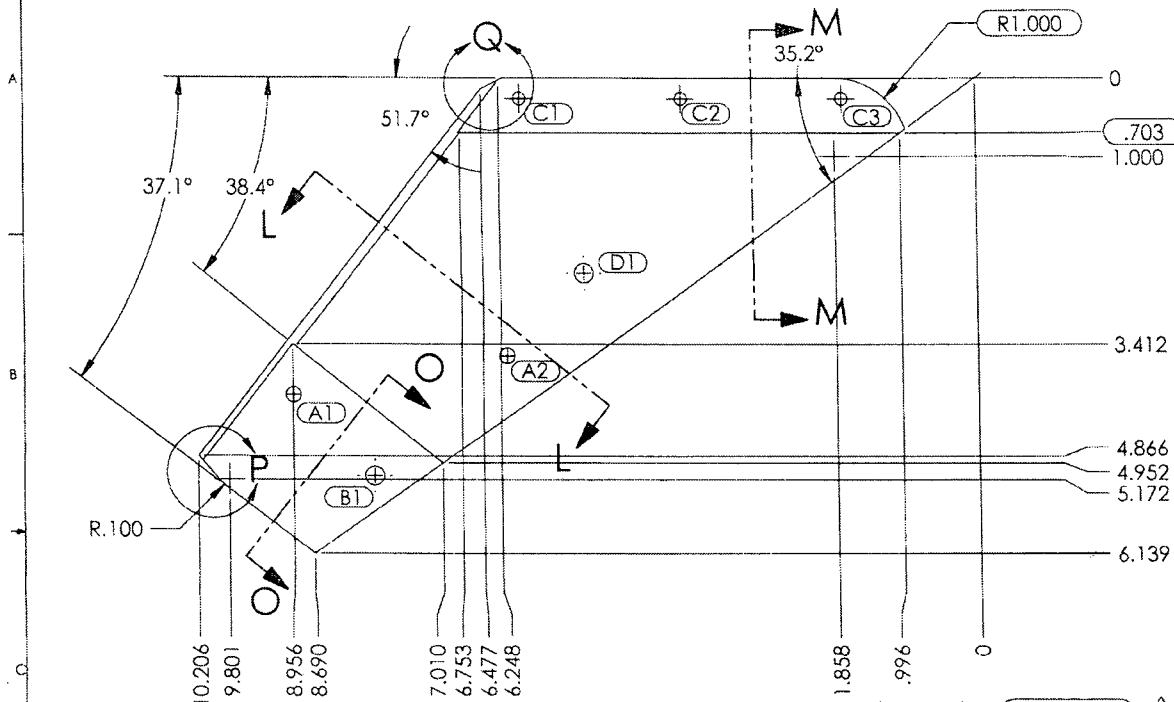
647.9414

APPROVAL DATE	DESIGNED BY	CHECKED BY
DRAWN BY	P. FORD	P. BRAY
DRAWING APPROVAL	P. BRAY	
DATE	10/1/90	

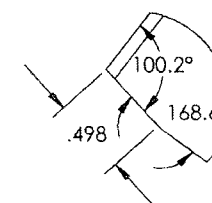
APICAL INDUSTRIES		
2608 TEMPLE HEIGHTS DR.		
OCEANSIDE, CA. 92056-3512 17601724-5300		
DEFLECTORS		
SCALE	NONE	SHEET 8 OF 9

DRAWING(S) 1-25-84 119 16-00-10 DRAWING(S) P. 10-00-10 P. 10-00-10 DRAWING(S) P. 10-00-10 P. 10-00-10 DRAWING(S) P. 10-00-10 P. 10-00-10	<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES DIMENSIONS ARE IN INCHES DIMENSIONS ARE IN INCHES DIMENSIONS ARE IN INCHES	DEFLECTORS 378 1 CASE CODE 3785 INC. 647.9400 SCALE NONE SHEET 8 OF 9

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES. ANY REPRODUCTION IN PART OR WHOLE WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED.

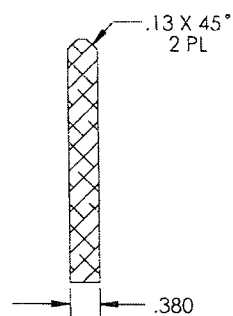


647.9415

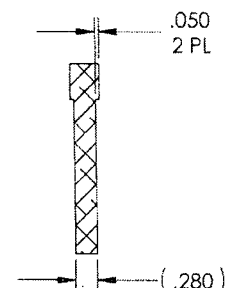


DETAIL P

TAG	X LOC	Y LOC	SIZE
A1	-8.949	-4.066	Ø.201
A2	-6.172	-3.562	Ø.201
B1	-7.903	-5.121	Ø.250
C1	-5.978	-.267	Ø.165
C2	-3.863	-.267	Ø.165
C3	-1.758	-.267	Ø.165
D1	-5.159	-2.500	Ø.250



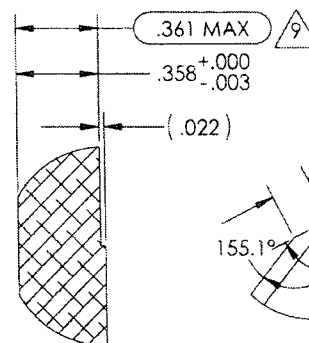
SECTION L-L



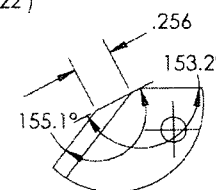
SECTION O-O



SECTION M-M



DETAIL N



DETAIL Q

ORIGINAL DATE (MM-DD-YY) 30-09-10		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056 3512 (760)724-5300			
DRAWN BY J. ROSA W.D.	CHECKED R. KRA W.D.				
DESIGNED BY	APPROVED				
DATE	BY				
CONTRACT NO.		<b>DEFLECTORS</b>			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TO FINISHES ARE 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°					
REF	CAGE CODE			QWG NO.	REV
B	07M16			647.9400	A
SCALE		NONE			
		SHEET 9 OF 9			

**APICAL INDUSTRIES**  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056 3512 (760)724-5300

**DEFLECTORS**



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO23813**

Purchase Order Date 4/15/2014

PO Print Date 4/25/2014

Page Number 4 of 6

**Order From :**

VC-ATG001

**Ship To :** DART AEROSPACE LTD

A.T.G. INDUSTRIES INC.  
731 INDUSTRIELLE ROAD  
ROCKLAND, ON K4K 1T2  
CANADA

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**Contact Name**

**Vendor Phone** 613-446-4544

**Ship To Contact**

**Ship To Phone**

**Ship Via:** VENDOR'S TRUCK

**Ship Acct:**

**Buyer**

**Customer POID**

**Customer Tax #** 10127-2607

**Terms** Net 30

**Currency** CAD

**FOB** FCA - (Free Carrier)

**Line Total:** \$36.30

10	109496	646.9812 LOWER CUTTER DEFLECTOR	5/7/2014	4.00	\$18.15	✓	\$72.60
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Yes

5/7/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$72.60

11	109618	647.9410 LOWER DEFLECTOR	5/7/2014	4.00	\$10.70	✓	\$42.80
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Yes

5/7/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$42.80

12	112221	647.9411 UPPER DEFLECTOR	5/7/2014	8.00	\$24.50	✓	\$196.00
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Yes

5/7/2014

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Note:**

4/25/2014



A.T.G. Industries Inc.  
731, rue Industrielle Rd.  
PLATING DEPARTMENT  
Rockland, On K4K 1T2  
Canada  
Ph: (613) 446-4544  
Fax: (613) 446-4556

### Pack List

Number: 63000

Date: 24-Apr-14

#### To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

#### Ship To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description	Rev:	
1 lot	Part: ASST 20 PCS 646.3313 (13.10) 11 PCS 646.3810 (6.55) <i>675</i> 10 PCS 646.3812 (6.10) 16 PCS 646.3813 (6.10) 12 PCS 646.9811 (32.60) 10 PCS 646.9812 (18.15) 4 PCS 647.9410 (10.70) 8 PCS 647.9411 (24.50)  HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2  PRIME MIL-P-23377J TYPE I CLASS N  3 PCS D2224 (2.00) ✓ RED ANODIZE MIL-A-8625 TYPE II CLASS 2  PRICE IS PER PIECE Job: 20140236	PO: 23813 Line:	
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY			
DATE: <i>24/4/14</i>			
CERTIFIED SIGNATURE: <i>[Signature]</i>			
RECEIVER SIGNATURE: _____			